



Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010

Richard Dunn
Director



Bob Holden
Governor

PLEASE PRINT

TEACHER'S NAME		GRADE
NAME OF CHILD	AGE	BIRTHDATE
SCHOOL		

The Missouri Department of Health and Senior Services, through the Oral Health Program, recommends that your child participate with their classmates in a fluoride mouthrinse program to help prevent tooth decay. Participants will swish a fluoride solution for one minute each week, under supervision. Regular participation by your child can result in a significant reduction in tooth decay.

Dental caries (tooth decay) ranks among the most prevalent diseases in our society today. Tooth decay begins in early childhood and can continue throughout adulthood. Community water fluoridation is still the most effective way to prevent tooth decay. However, fluoride mouthrinse can be used whether your community is fluoridated or not. We know after years of research that topically applied fluoride (mouthrinsing) makes teeth less susceptible to decay. These measures can also be used in addition to topical fluoride applications in your dentist's office.

The U.S. Public Health Service, the U.S. Food and Drug Administration, the Missouri Department of Health and Senior Services, the American Medical Association, the American Dental Association and your local dental society, has endorsed the Fluoride Mouthrinse Program as being safe and effective.

If you wish your child to receive the benefits of this program, please return this signed permission form to the school. This signed permission slip is a permanent authorization for participation in the program. If at any future time you wish to discontinue your child's participation, please notify the school.

Sincerely,

Moncy Mathew, BDS, MPH
Manager
Oral Health Program
Missouri Department of Health and Senior Services
(573) 751-6247

☐ YES, I WANT MY CHILD TO PARTICIPATE IN THE FLUORIDE MOUTHRINSE PROGRAM.

☐ NO, I DO NOT WANT MY CHILD TO PARTICIPATE.

PARENT OR GUARDIAN SIGNATURE 	DATE
----------------------------------	------

MO 580-0424 (7-03)

DD-2

www.dhss.state.mo.us

The Missouri Department of Health and Senior Services enhances quality of life for all Missourians by protecting and promoting the community's health and the well-being of citizens of all ages.

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER: Services provided on a nondiscriminatory basis.